

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE					
						APPLICANT(S)						
CLAIMS						*	*	*				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1											
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49												
50												
TOTAL IND.	2											
TOTAL DEP.	15											
TOTAL CLAIMS	17											
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS												